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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re the Application of:) Group Art Unit: 2873
 JOHNSON et al.)
 Serial No.: 10/634,103) Confirmation No. 5859
 Filed: August 1, 2003)
 Atty. File No.: 1604-459) Examiner: Thomas, Brandi N.
 For: "METHOD AND APPARATUS FOR)
 PROVIDING A GAS CORRELATION)
 FILTER FOR REMOTE SENSING)
 OF ATMOSPHERIC TRACE GASES")

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Dear Sir:

Applicants submit this Amendment and Response to address the Office Action having a mailing date of December 14, 2004. Authorization to charge Deposit Account No. 19-1970 in the amount of \$400 as the fee for the addition of two independent claims in excess of those previously paid for is hereby given. Please charge any underpayment or credit any overpayment to Deposit Account No. 19-1970.

Reconsideration and withdrawal of the objections to and rejections of the claims are respectfully requested.

AMENDMENT AND RESPONSE

CERTIFICATE OF FACSIMILE TRANSMISSION	
I hereby certify that this paper is being facsimile transmitted to the U.S. Patent and Trademark Office (Fax No. 703/672-6368) on <u>3/14/05</u> .	
SHERIDAN ROSS, P.C. <i>[Signature]</i> KATHLEEN McENNISH	

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PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2004

10/634 103

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	minus 20 =	
INDEPENDENT CLAIMS	minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR PRESENT EXTRA
Total	3/14/05 44	Minus	-- 44 =
Independent	9	Minus	-- 4 5
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

1, 2, 16, 19, 24, 29, 32, 33 43

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY PAID FOR PRESENT EXTRA
Total		Minus	
Independent		Minus	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR PRESENT EXTRA
Total		Minus	-- =
Independent		Minus	-- =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "--".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE		OTHER THAN SMALL ENTITY	
RATE	FEES	RATE	FEES
BASIC FEE	395.00	OR BASIC FEE	790.00
x .25		OR x .50	
x 100		OR x 200	
+180		OR +360	
TOTAL		OR TOTAL	

SMALL ENTITY		OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
x .25		OR x .50	
x 100		OR x 200	1,000
+180		OR +360	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

AMENDMENT A		AMENDMENT B	
RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
x .25		OR x .50	
x 100		OR x 200	
+180		OR +360	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

AMENDMENT C		AMENDMENT D	
RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
x .25		OR x .50	
x 100		OR x 200	
+180		OR +360	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	